

PART B - FEE(S) TRANSMITTAL



JUN 13 2008

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9933 7590 03/14/2008
DUANE MORRIS, LLP
IP DEPARTMENT
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/758,154	01/14/2004	Saul Le-Garcia Rodolfo	D0932-00416	5769

TITLE OF INVENTION: HIDDEN VENTILATION TRIM ACCESSORY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$1740	06/14/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
SPAHN, GAY	3635	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. Duane Morris LLP

2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CERTAINTEED CORPORATION

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

VALLEY FORGE, PA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1679 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature: /Steven E. Koffs/

Date: 06-13-2008

Typed or printed name: Steven E. Koffs

Registration No. 37163

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06/16/2008 INTEFSW 00000b19 10/15/08